

CHEMICAL RESTRAINT

Note: **Haloperidol or Midazolam** are to be used for sedation only by order of online Medical Control. **Haloperidol** is not for use in pediatric, pregnant, or head injured patients.

1. Indications:

- a. Patient is extremely agitated, violent, and/or combative. Efforts to calm and control the patient verbally and with light physical restraint are unsuccessful and there is a danger of injury to the patient, EMS personnel or bystanders.

2. Procedure:

- a. After above attempts to calm and restrain the patient failed, **contact Online Medical Control.**
- b. Consider **Haloperidol** administration:
 - i. Usual dosage: 5-10 mg IM or 2-5mg I.V.
 - ii. Onset of action is 10 to 20 minutes IM or 5 to 10 minutes I.V.
 - iii. Additional doses may be administered only after consultation with Online Medical Control.
- c. Consider **Midazolam** intranasal: inspect nostrils for mucus, blood or other problems, which might inhibit absorption. Draw 0.2 mg/kg up to 10mg of 5mg/ml solution for delivery by atomizer device. Give ½ of volume in each nostril.

Pediatric kg. Weight estimation: $10 + (2 \times \text{Age in years})$

- d. If no response to intranasal **Midazolam** in 5 minutes, administer IV or IM dose:
 - i. Intramuscular: 0.2 mg/kg up to 10mg of 5mg/ml solution.
 - ii. Intravenous: 0.1 mg/kg up to 5mg of 5mg/ml solution, inject slowly until patient calm, speech slightly slurred. Be prepared to support ventilation if needed.
- e. Continue to monitor the patient. Physical restraint may still be necessary.
- f. Transport to the appropriate hospital.